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FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112

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(Occositor's name (Signatu (Da

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/601 678 06/24/2003 Mitsuhiro Sugeta 01272.020594 9503

TITLE OF INVENTION: IMAGE READING APPARATUS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | |
|--|--------------|---------------|--|----------------------|---------------------|--|--|
| nonprovisional | NO | \$1440 | \$300 | \$0 | \$1740 | 02/25/2008 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | |
| SINGH, SA | TWANT K | 2625 | 358-475000 | | | | |
| L Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address tom PTO/S8/122) statehed. Fee Address "indication (or "Fee Address" indication form PTO/S8/122), Fee 0.542 or more recent) attached. Use of a Customer TO/S8/17, Fee 0.542 or more recent) attached. Use of a Customer | | | 2. For printing on the patent from page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | era 2 <u>HARPEF</u> | 1 FITZPATRICK, CELLA 2 HARPER & SCINTO 3 | |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

CANON KABUSHIKI KAISHA TOKYO, JAPAN

Please check the appropriate assignce category or categories (will not be printed on the patent):

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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